

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

ADDRESS (number and street) 1133 SW Topeka Blvd. CC:855 - B3 Topeka KS 66629 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00197202 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special Election on 11/06/2012 in the State of KS

5. Covering Period 10/01/2012 through 11/26/2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ann M. Shelton

Signature of Treasurer Ann M. Shelton [Electronically Filed] Date 11/29/2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="4670.27"/>	<input type="text" value="4670.27"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5081.97"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1556.43"/>	<input type="text" value="9124.13"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="6638.40"/>	<input type="text" value="13794.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1868.00"/>	<input type="text" value="9024.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4770.40"/>	<input type="text" value="4770.40"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1237.00	5035.25
(ii) Unitemized	319.00	4084.75
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1556.00	9120.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1556.00	9120.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.43	4.13
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1556.43	9124.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1556.43	9124.13

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	1368.00	7524.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	1500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1868.00	9024.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1868.00	9024.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1556.00	9120.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1556.00	9120.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

A. Raymond Ayala Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 811 S. Kansas Ave.
City Topeka State KS Zip Code 66612
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Chief Technology Officer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **345.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.4988
Amount of Each Receipt this Period **60.00**
\$15 for four pay periods

B. Andrew Corbin
Full Name (Last, First, Middle Initial)
Mailing Address 6337 SW Hodges Road
City Auburn State KS Zip Code 66402
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation President & CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **920.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.4989
Amount of Each Receipt this Period **160.00**
\$40 for four pay periods

C. Bernardo Cruz
Full Name (Last, First, Middle Initial)
Mailing Address 8417 Shadow Lakes
City Wichita State KS Zip Code 67205
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Mgr Associations/Special Accounts
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.4991
Amount of Each Receipt this Period **40.00**
\$10 for four pay periods

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

A. Paula Daoust
 Full Name (Last, First, Middle Initial)
 Mailing Address 4501 N. 111th St.
 City Kansas City State KS Zip Code 66109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation Director, Workforce & Leadership
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.4992
 Amount of Each Receipt this Period 80.00
 \$20 for four pay periods

B. Roni Davis-Watson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3121 SW Belle Ave
 City Topeka State KS Zip Code 66614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation Dir, Mkt Research/Prod Devel.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.4993
 Amount of Each Receipt this Period 80.00
 \$20 for four pay periods

C. Mark Dolsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 3624 SE Tomahawk Drive
 City Tecumseh State KS Zip Code 66542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BCBSKS Occupation Vice President Sales & Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.4995
 Amount of Each Receipt this Period 80.00
 \$20 for four pay periods

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

A. Rusty Doty
Full Name (Last, First, Middle Initial)
Mailing Address 4611 SE Paulen Rd
City Berryton State KS Zip Code 66409
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Director, Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **460.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.4996
Amount of Each Receipt this Period **80.00**
\$20 for four pay periods

B. Julie Hinrichsen
Full Name (Last, First, Middle Initial)
Mailing Address 2440 SE 41st Street
City Topeka State KS Zip Code 66609
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation VP, Information Services, CIO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **460.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.5000
Amount of Each Receipt this Period **80.00**
\$20 for four pay periods

C. Beryl Lowery-Born
Full Name (Last, First, Middle Initial)
Mailing Address 1172 College
City Topeka State KS Zip Code 66604
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Vice President, Finance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **656.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.5004
Amount of Each Receipt this Period **120.00**
\$30 for four pay periods

SUBTOTAL of Receipts This Page (optional)..... **280.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

A. Mischa McHenry
Full Name (Last, First, Middle Initial)
Mailing Address 3314 SE 23rd Terr
City Topeka State KS Zip Code 66605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Director, IS Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.5007
Amount of Each Receipt this Period 60.00
\$15 for four pay periods

B. Suneetra N. Mickle
Full Name (Last, First, Middle Initial)
Mailing Address 229 Eisenhower Drive
City Lawrence State KS Zip Code 66049
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Dir, Government Relations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.5009
Amount of Each Receipt this Period 60.00
\$15 for four pay periods

C. Frederick Palenske
Full Name (Last, First, Middle Initial)
Mailing Address 6225 SW Vorse Rd
City Auburn State KS Zip Code 66402
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation VP, Prov Relations & Medical Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 442.75

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.5012
Amount of Each Receipt this Period 77.00
\$19.25 for four pay periods

SUBTOTAL of Receipts This Page (optional)..... ▶ 197.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

A. Scott Raymond
Full Name (Last, First, Middle Initial)
Mailing Address 1422 SW Collins Ave.
City Topeka State KS Zip Code 66604
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Asst. General Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.5015
Amount of Each Receipt this Period **40.00**
\$10 for four pay periods

B. Ronald Simmons
Full Name (Last, First, Middle Initial)
Mailing Address 3303 NW Bent Tree Lane
City Topeka State KS Zip Code 66618
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **920.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.5021
Amount of Each Receipt this Period **160.00**
\$40 for four pay periods

C. Angie Strecker
Full Name (Last, First, Middle Initial)
Mailing Address 3911 SW Stratford Rd
City Topeka State KS Zip Code 66604-2468
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Director, Institutional Relations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **345.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.5024
Amount of Each Receipt this Period **60.00**
\$15 for four pay periods

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	1237.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

Full Name (Last, First, Middle Initial)

A. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
monthly contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SB22.5031

Amount of Each Disbursement this Period

684.00

Full Name (Last, First, Middle Initial)

B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
monthly contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2012			

Transaction ID : SB22.5032

Amount of Each Disbursement this Period

684.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1368.00

1368.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of Kansas, Inc. Employee PAC

Full Name (Last, First, Middle Initial)

A. KANSANS FOR HUELSKAMP

Mailing Address PO BOX 410

City FOWLER State KS Zip Code 67844

Purpose of Disbursement re-election campaign contribution

Candidate Name

TIMOTHY A REPRESENTA HUELSKAMP

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: KS District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			23			2012					

Transaction ID : SB23.5035

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

500.00

500.00
